497 Contribut	tion Report	Type or print in ink ts may be rounded to w	hala della m	* <u>*</u>	٠,	0
AREA CODE/PHONE NUI  # 31 2  STREET ADDRESS  CITY  1. Contribution	Stephen Derek Barkalow  MBER (I.D. NUMBER (I applicable)  177 7045 1301586  STATE ZIPCODE	Date of	5/30/DECE in the offic of t	Date Stamp IVED AND FILED e of the Secretary of State he State of California MAY 3 0 2008 BRA BOWEN retary of State	CALIFO FOR	
DATE						
RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTI	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMP (IF SELF-EMPLOYED, ENTER NAME OF E	LOYER	AMOUNT RECEIVED
May 30, 2008	Rita Gallegos		IND COM OTH SCC	Hmemaker		\$1,000,00 ☐ Check if Loan Provide interest rate
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loan  Check if Loan  %  Provide interest rate
			OTH PTY SCC			Check if Loan
Reason for Amendme	ent:			*Contributor Codes IND – Individual COM – Recipient Comr OTH – Other (e.g., bus PTY – Political Party SCC – Small Contributo	siness entit	er than PTY or SCC) y)

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